

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66671	7/31
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	AL		9/11/00
RESPONSE FORMALITY REVIEW	LH	60105	2-12-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
1	✓
2	✓
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Claim	Date
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AVAILABLE COPY

If more than 150 claims or 10 actions
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